

BEST AVAILABLE COPY

**CLAIMS ONLY**

SERIAL NO. \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2	1	1				
3	1					
4		1				
5	1					
6		1				
7		3				
8	1					
9		1				
10	1					
11		1				
12	1					
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14		3				
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16	1					
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TOTAL IND.	8		↓		↓	
TOTAL DEP.	15		↔		↔	
TOTAL CLAIMS	23					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			↓		↓	
TOTAL DEP.			↔		↔	
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS